# OSHPD Career Pathway Sub-Committee Phase III Launch

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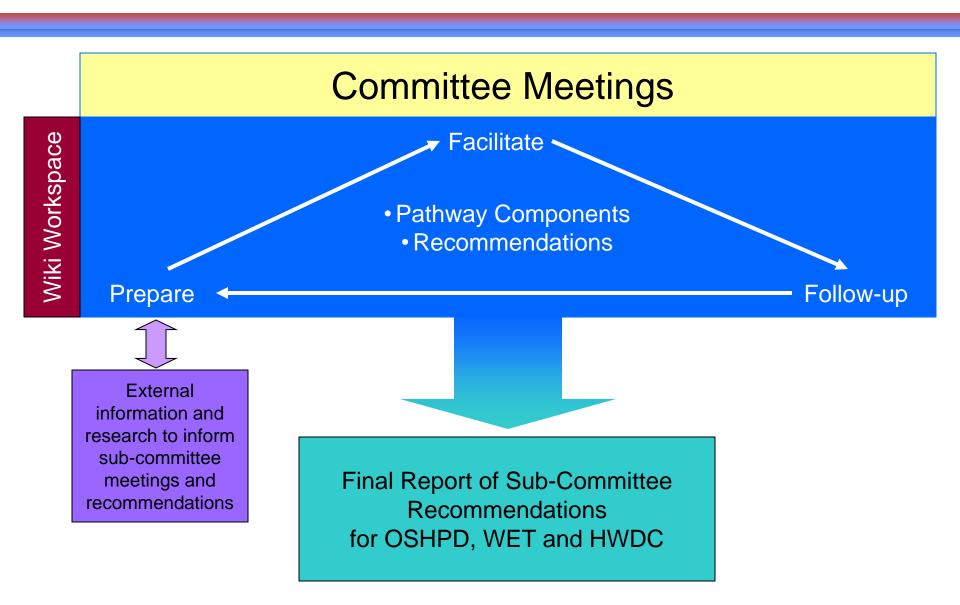
### Overview

- UCB team
- Pathway development approach
- Scope of work and process outcomes
- Pathway Model & recommendations template
- Sample pathways
- Time line
- Ground rules for participation

### Pathway Development Approach

- Systems-level pathways for priority professions
- Use the Coordinated Health Pathway Framework
- Customize Pathway for each profession.
   Individual pathway also useful if available.
- Experts chosen to lead pathway development; identify barriers, recommendations and actions
- Sub Committee reviews and approves
- Recommends to WET Advisory Board for final approval & use

### Scope of Work



### **Process Outcomes**

Pathways	Recommendations		cture and endations		
#1: Psychiatrists	• Rec. #1 • Rec. #2 • Rec. #3				
#2: Psychiatric Mental Health Nurse Practitioner/CNS	• Rec. #1 • Rec. #2 • Rec. #3	Cross-Pa Recs.	thway	Cross-Pa Recs.	athway
#3: Clinical Psychologists	<ul><li>Rec. #1</li><li>Rec. #2</li><li>Rec. #3</li></ul>				
#4: Marriage and Family Therapist	• Rec. #1 • Rec. #2 • Rec. #3	Pathway- Specific	Pathway- Specific	Pathway- Specific	Pathway-

### Coordinated Health Workforce Pathway

**Health Professions Education** 

Cultural Sensitivity and Responsiveness-

#### **Target Groups: Incumbent Workers** High School and Community College Students K-12 Education **Career Changers Displaced Workers Undergraduates Immigrant Health Professionals Graduate Public Health Students Medical Students and Residents** Veterans Health **Academic Financial Training Professions** Internships Career Preparation & Logistic **Program** Assessment **Training Awareness** & Entry **Feasibility** Retention **Program** Support Access

**Coordination and Support Infrastructure** 

**Quality, Diverse Health Workforce** 

Workforce

Financing

& Support

**Systems** 

Hiring &

Retention &

**Orientation Advancement** 

**Pre-Training** 

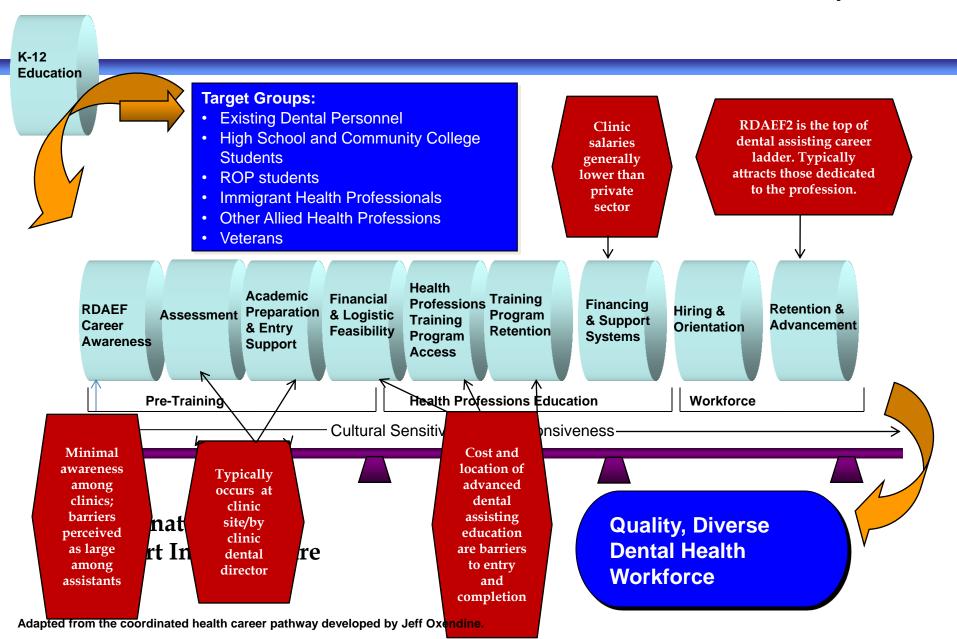
## Pathway Development Template For Each Profession

- 1. Summarize current situation and future need
- 2. Customize the Pathway Template
- 3. Identify barriers related to pathway elements
- 4. Propose recommendations to address barriers
- 5. Develop action steps to refine and implement recommendations

# Pathway Development Template Other Pathway Elements

- INDIVIDUAL PATHWAYS
- EDUCATION AND TRAINING CAPACITY AND INFRASTRUCTURE
- ACADEMIC AND HEALTHCARE INDUSTRY SKILL STANDARDS
- AVAILABILITY OF CAREER INFORMATION AND GUIDANCE COUNSELING
- ADDITIONAL RESOURCES

### Coordinated Health Workforce Pathway



### Recommendations to Address Identified Barriers

Barrier	Recommendation
Accessibility of training programs	Increase opportunities for RDAEF training; develop alternative modalities for training, including online didactic education, that are adaptable to rural and other underserved populations

### **Action Plan**

Broad Strategy:	Increase number of RDAEF2 working in community clinics throughout California, particularly in underserved areas				
Baseline:					
Objective	Activities	Anticipated Outcome	Timeline	Lead and Resources	Evaluation Methods
Address fiscal, programmatic and awareness barriers for safety net dental providers to hire RDAEF2 staff	<ul> <li>Identify best practices in current clinics effectively utilizing RDAEF2s</li> <li>Outreach and technical assistance to safety net providers, dental directors &amp; dental assisting community</li> <li>Work with OSHPD and public and private funders to identify and access available training and grant funds</li> <li>Increase opportunities for RDAEF training; develop alternative modalities for training, including online didactic education, that are adaptable to rural and other underserved populations</li> </ul>	Increased number of culturally competent, locally connected RDAEF2s supporting the provision of dental care in community clinics	12-24 months	CDA CPCA OSHPD Other safety net organizati ons	Measure increased numbers of RDAEFs in clinics and increases in the provision of care in these sites

### Pathways Developed

Pathway	Lead Individual and Expert Group
Clinical Laboratory     Scientists	Cathy Martin (California Hospital Association (CHA)) and Health Laboratory Workforce Initiative (HLWI)
Primary Care Physicians	Jeff Oxendine and California Health Workforce Alliance (CHWA), Primary Care Initiative
Primary Care Nursing	Priscilla Gonzalez-Leiva Deloras Jones, Carolyn Orlowski and Pilar De La Cruz and California Institute for Nursing in Healthcare (CINHC)
Social Workers	David Cherin and California Association of Deans and Directors of Social Work (CADD),     California Social Work Education Center (CalSWEC)
Community Health     Workers/Promotores	Gil Ojeda, Perfecto Munoz, and the Promotores Workgroup (Alma Avila, City College of San Francisco; America Bracho MD, Latino Health Access; Arturo Carmona, CoFEM; Xochitl Castaneda, HIA-UC Berkeley; Melinda Cordero, Vision y Compromiso; Julie Hernandez, Proteus; Lupe Nunez, Tiburcio Vasquez Health Center; Helda Pinzon Perez PhD, Professor, CSU Fresno; Josefina Ramirez, and Assembly Member Manuel Perez).
Medical Assistants	Diane Factor, Caryn Rizell, Linda Zorn and the California Society of Medical Assistants
Public Health     Professionals	Jeff Oxendine and California Public Health Alliance for Workforce Excellence (CPHAWE)     Steering Committee
Alcohol and Other Drug     Abuse Counselors*	Sherry Daley and California Association of Alcoholism and Drug Abuse Counselors (CAADAC)
Direct Care*	Jeff Oxendine and Jennifer Lachance, referencing the SCAN Foundation report
Physician Assistants*	Jeff Oxendine and California Association of Physician Assistants

Office of Statewide Health Planning and Development California Workforce Investment Board Health Workforce Development Council Career Pathway Sub-Committee

Final Report

November 2011



Douglas Sale
Acting Executive Director



Edmund G. Brown Jr.
Governor



Stephanie Clendenin Acting Director

Prepared by:



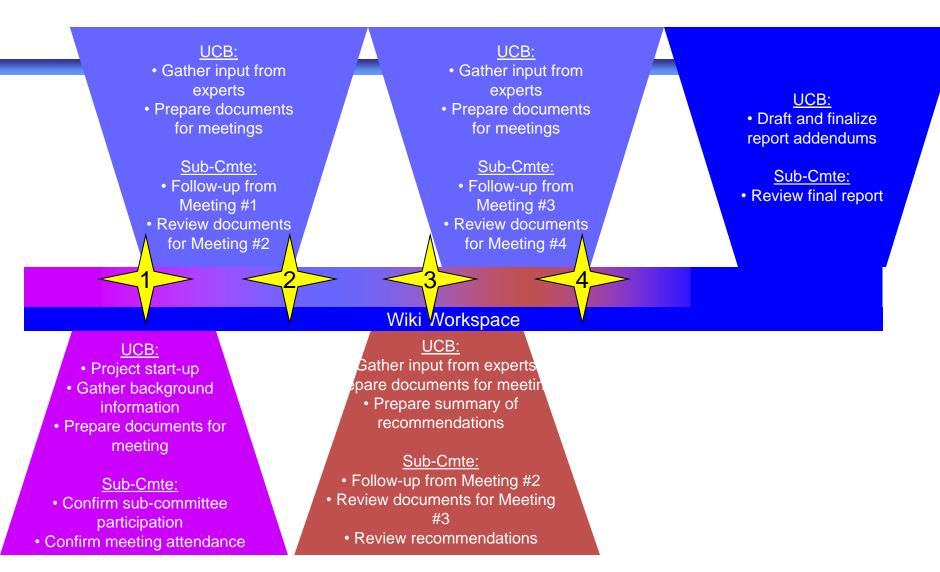
# What has been done with the Pathways and Recommendations?

- Pathways presented to & adopted by Council
- Submitted as part of CA report to HRSA
- Used to develop action plans considered by the Council & core of overall HWDC plans
- Recommendations & action plans being implemented
- Recommendations being considered by funders and organizations

### **Process**

- Experts chosen for each profession
- Facilitators work with experts from each profession to develop system level pathways using template
- Recommendations and action plans reviewed and approved by Sub Committee
- Facilitators capture Cross cutting & infrastructure recommendations for Sub Committee approval
- WET advisory approves overall recommendations

### **Timeline**





Denotes sub-committee meetings

### **Ground Rules**

- Balanced participation
  - Facilitator will acknowledge and ask people to participate
  - Step up/Step back
- Come prepared to make the most of our time
- Go beyond organizational interests- shared interests,
   CA solutions
- It's okay to disagree
- Be present
  - Time for breaks/email/work check-in will be provided
- Question assumptions
- Collaborative decision-making methodology

# Term to use for Pathway Development

 Behavioral health, mental health, and substance abuse

Want to use these terms?

 Need to further define these terms based on our charge?

### Thank you

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